

ICRW Mission Report to Inter-Agency Working Group, HIV-DDR sub Working Group: Annexes

PROJECT TITLE:

Monitoring & Evaluation Support to the Joint United Nations Programme for Peace Consolidation, Conflict Prevention and Human Security in the Republic of Congo

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ORGANIZATION:

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Annex 1: Terms of Reference for Republic of Congo M&E Support

I. Background

A. Context

The Republic of Congo's post-conflict context is characterised by a gradual consolidation of peace and promotion of democracy as well as an increase of reconstruction and economic recovery activities. Although the violent phase of Congo's civil war ended in 1999, hostilities formally ended in 2003 with the signing of a Peace Agreement that reaffirmed the 1999 accord following the controversial elections of 2002. The civil war considerably damaged most of Brazzaville's infrastructure, disrupted productive economic activities in most parts of the country and reversed the social and economic progress that Congo had in the 1980s and early 1990s.

In December 2009, the leader of the rebel forces took up his duties as a DDR Minister. However, 5,000 excombatants remained in the Pool region without sustainable livelihoods. Furthermore, the command structures among ex-combatants have largely dissolved, leaving individuals ex-combatants isolated, scattered out between geographically distant communities and with no access to a functioning social network. This context accounts for a reported increase in criminal activities and insecurity in the Pool region.

UNDP has completed a number of reintegration programs, notably a sequence of PRESJAR programs', which primarily focussed on women and youth in reintegration programs. To ensure continuation of the PRESJAR initiatives and to address a new case load of 5,000 combatants, the UNDP country office developed an Inter-Agency project proposal which was approved for funding by the Human Security Trust Fund for a little over 4 million USD (including 2 million USD from the Government of RoC). This *Joint United Nations Programme for Peace Consolidation, Conflict Prevention and Human Security in the Republic of Congo* seeks to contribute to the consolidation of peace and social stability, provide sustainable livelihoods to vulnerable populations and enhance the overall level of human security in the Republic of Congo. Partners to this Joint Program are: UNDP, UNFPA, FAO, WHO and UNICEF. The project specifically aims to complete the reintegration of ex-combatants, improve delivery of and access to basic social services, support community empowerment and promote a culture of peaceful existence, targeting five communities in the Pool region that are receiving a high number of ex-combatants.

Through collaborative efforts of five different UN agencies and national counterparts, the project engages in (i) supporting income generating activities of ex-combatants, (ii) improving water and sanitation services, (iii) increasing access of ex-combatants, youths at risk and women affected by conflict to better treatment for HIV/AIDS, (iv) promoting better understanding of and access to improved school facilities, (v) improving understanding of maternal and child health care and nutrition issues, (vi) developing a civic education framework and a peacebuilding and conflict prevention programme, and (vii) protecting women and girls against gender-based violence and providing medical and psychosocial assistance to victims of gender-based violence.²

¹ **Presjar I**- Pilot Project on Community Development for Women affected by Armed Conflict (2008-2011); **Presjar II**-Preparatory Assistance Programme to Support Community Security and the Reintegration of Ex Combatants and Associated Groups in the Pool and Adjacent Areas (2009-2011); **Presjar III**-Transitional Project for the Sustainable Reintegration of Ex-Combatants and Women Associated with Armed Groups in Bondo/Kinkala (Pool Region) (Oct-Dec 2010).

² Program proposal as submitted on 3 October 2011, Joint UN Program for Peace Consolidation, Conflict Prevention and Human Security in the Republic of Congo.

B. Project Monitoring and Evaluation

A recent mission carried out by the Inter-Agency Working Group on DDR (represented through UNDP/BCPR) and the International Centre for Research on Women (ICRW) indicated amongst others the need to provide immediate support to the CO with respect to the strengthening of the programs M&E system, including the program's M&E framework and tools used to collect information for the database.

First, a strong M&E framework is critical in order to adequately report on the overall results and impact of the project, including adequate reporting on sex- and age disaggregated data. As recognized by the IAWG, sex and age disaggregated M&E is an important basis to respond to the Secretary General's request to commit at least 15% of peacebuilding funding to target women's needs and empowerment, as highlighted also in the Policy Committee Decision of November 2010. Second, the current situation in the program target area remains volatile. Regular program monitoring will allow project partners to carry out contingency planning when required, critical for achieving overall project results. Third, conversations with key program partners highlighted challenges as to joint project implementation. Although the joint and comprehensive nature of the Joint Program is certainly commendable, key partners lacked a clear view (primarily outside UNDP) of the implications of joint program implementation as well as the how best make use of the comparative advantages of each partner, possibly following from the fact that the current Joint Program is one of the first true Inter-Agency programs in RoC. The development of a joint M&E framework is believed to strengthen a common incentive for partners and thereby encourage joint program implementation.

II. Deliverables

Based on the assessment and recommendations following from the mission, the following deliverables are proposed:

- Revise project logframe to ensure M&E system can demonstrate project impact-
 - A) Indicators will be reviewed using the <u>SMART criteria</u> to allow for measurable and objective M&E consistently across communities and beneficiaries;
 - B) Strengthen project indicators with respect to gender/ HIV responsiveness;
 - C) Propose indicator adjustments to project partners to ensure that overall M&E logframe measures project *impact* at community level (i.e. moving beyond process indicators) (5 days)
- **Strengthen tools used for data collection** Just as critical to the logical framework having SMART indicators to reflect the progress toward the project's stated goals, is the collection of baseline measures to show the starting point from which such progress has been made. By developing both baseline and follow-up measures at the design phase, the project will be able to demonstrate the changes it has effectuated and the impact of its activities. The deliverable does not include the data collection itself, but rather on revision of the tools used to gather information, including the <u>intake surveys</u> to ensure they provide measures of key indicators of project achievements (5 days);

III. Methods and duty station

In order to achieve the above deliverables, the consultant will, amongst others:

- **Field work** Organize bilateral meetings with key project partners in country, in close collaboration with the UNDP CO. The consultant will work with the project partners in country for at least 2 weeks through at least one mission to Brazzaville;
- **Pre-launch coordination sessions** Facilitate one or more group sessions with key project implementing partners, facilitated by the UNDP CO and supported by a national consultant, aimed to jointly discuss project indicators. Apart from gathering input for the revision of the project indicators, the sessions are aimed to developed a common project vision and understanding;

• **Distant support**- The remaining time, the consultant will work from her home base in Washington D.C., while remaining in close contact with the field partners while working on the above deliverables.

A national consultant will be deployed *before* the first field mission of ICRW. The national consultant will primarily be responsible for conducting mapping of agencies' presence, activities and on-the-ground partners in the proposed zone of intervention of the project. This overview will form an important basis for the revision of the M&E logframe. Please see the separate ToR for the national consultant.

IV. Travel, fees and terms of payment

Funds will be made available to ICRW through the IAWG. ICRW will provide a financial report no later than 30 April. Payments will be made upon deliverable of final products.

V. Provision of monitoring and progress controls

ICRW will work under the supervision of the UNDP CO in Brazzaville as the main coordinating agency for the overall project. ICRW will, however, work closely with all project partners while working on above specified deliverables. Review and substantive comments to the deliverables will be provided throughout the contract period by the IAWG sub-working group partners, UNDP and UNFPA in particular.

Annex 2: Agenda for M&E Mission

Day 1	Arrival of ICRW to Brazzaville
Day 2	10:00 In-brief with UNDP Reintegration and Community Development Unit
	12:00 Meeting with Management Consultant (Mr. François Sita)
	3:00 Meeting with Focal Points of all 5 agencies (UNICEF)
Day 3	9:00 Meeting with Management Consultant (Mr. François Sita)
	11:00 Meetings with UNDP Reintegration and Community Development Unit
	2:00 Working session with Management Consultant (Mr. François Sita)
Day 4	10:00 Meeting UNICEF focal point and Education team
	12:30 Working session with Management Consultant (Mr. François Sita)
	1:00 Meeting with UNDP Assistant Resident Representative
	3:00 Meeting UNFPA focal point and Human Rights team
Day 5	10:00 Meeting WHO focal point and HIV team
	12:30 Working session with Management Consultant (Mr. François Sita)
	3:00 Meeting FAO focal point and Agriculture team
Days 6-7	All day Working session to revise Annual Work Plan targets
Day 8	9:00 Meeting with UNDP Reintegration and Community Development Unit
	12:00 Working session with Management Consultant (Mr. François Sita)
	3:00 Session with Focal Points of all 5 agencies (UNICEF)
Day 9	9:00 Session with UNDP Program Management Team
	11:00 Working session to revise recommendations
	3:00 Meeting with UNDP Reintegration and Community Development Unit
Day 10	8:30 Working session to revise recommendations
	11:00 Out-brief with Management Consultant (Mr. François Sita)
	4:00 Out-brief with UNICEF Resident Representative
	5:00 Out-brief with UNDP Reintegration and Community Development Unit

Annex 3: Meeting/Workshop Participants

<u>United Nations Development Program (UNDP)</u>

Mr. Lamin Manneh, Resident Representative

Mr. Eloi Kouadio, Deputy Resident Representative

Mr. Troels Sorensen, Assistant Resident Representative

Mr. Cyprien Balaya, Senior Project Associate*

Ms. Laetitia Loko, Community Support Associate*

Mr. Guy Saizonou, Senior Technical Advisor*

Ms. Claude-Angella Mabassy, Gender Associate*

Ms. Emelyne Bahanda, Governance Program Advisor

Mr. Elliot Dalmeida, Program Assistant

Mr. Joseph Ikoubou, Project Director (Support for Marginalized groups)

Ms. Noëlla Ingani, Assistant to the Deputy Resident Representative

Mr. Jean-Felix Issang, Environment Program Advisor

Mr. Alain Mpoue, Poverty Program Advisor

Ms. Gisèle Otabo, Finance Assistant

Ms. Nadège Zoula, Gender/HIV/UNWomen Focal Point, UNDP Program Advisor

Mr. François Sita, Management Consultant

Food and Agriculture Organization of the United Nations (FAO)

Mr. Marius Saya-Maba, Assistant Representative, Program Officer*

Ms. Renatou Traoré-Sama, National Consultant*

United Nations Population Fund (UNFPA)

Ms. Elizabeth Gueye, Gender Program Analyst*

Ms. Constance Mathurine Mafoukila, Gender and Human Rights Program Advisor*

United Nations Children's Fund (UNICEF)

Mrs. Marianne Flach, Resident Representative

Mrs. Christine Nare Kabore, Deputy Resident Representative

Mr. Diawara Bakary, Education Specialist

Ms. Felicité Mbeni Issongo, School Construction Consultant

Mr. Alexis Mfoukou Moko, Education Officer*

World Health Organization (WHO)

Dr. Youssouf Gamatie, Resident Representative

Dr. Norbert Bidounga, HIV Program Advisor

Mr. Jean de Dieu Konongo, Advisor*

*Those participants marked with an asterisk are the Join Program focal points and/or key members of the project coordination team.

<u>Annex 4:</u> Revised Logical Framework



REPUBLIC OF CONGO

PROPOSAL FOR THE UNITED NATIONS TRUST FUND FOR HUMAN SECURITY

Date of submission	3 October 2011
Benefiting country and location	Republic of Congo (focusing on five communities of Mindouli, Kindamba, Mayama, Boko and Kinkala in the Pool region where there are large numbers of excombatants and a high need for improved human security)
Title of the project	Joint United Nations Programme for Peace Consolidation, Conflict Prevention and Human Security in the Republic of Congo
Duration of the project	36 Months
UN Organization responsible for management of the project	UNDP
Executing UN organization(s) (including contacts in the field offices)	UNDP, FAO, WHO, UNICEF, UNFPA
Non-UN executing partners	HCREC, HCICEM, Ministry of Planning, FAC
Total project cost	USD 4,032,188.00

Executive summary

The Republic of Congo has been struggling to recover from damages of the civil war for years, even after the signing of the Peace Agreement in 2003 which formally brought the civil war to an end. Following political instability and hostilities between the national army and armed groups, the country is now facing challenges to reintegrate ex-combatants left without sustainable livelihoods and functioning social network. With the majority of its infrastructure destroyed and productive economic activities disrupted, it is critical to address comprehensively the needs of communities, not only of ex-combatants, to consolidate peace and improve human security in the Republic of Congo.

The Joint United Nations Programme for Peace Consolidation, Conflict Prevention and Human Security in the Republic of Congo seeks to contribute to the consolidation of peace and social stability, provide sustainable livelihoods to vulnerable populations and enhance the overall level of human security in the Republic of Congo. The project specifically aims to complete the reintegration of ex-combatants, improve delivery of and access to basic social services, and to support community empowerment and promote a culture of peaceful existence, targeting five communities in the Pool region that are receiving high number of ex-combatants.

Through collaborative efforts of five different United Nations agencies and national counterparts, the project engages in (i) supporting income generating activities of ex-combatants, (ii) improving water and sanitation services, (iii) increasing access of ex-combatants, youths at risk and women affected by conflict to better treatment for HIV/AIDS, (iv) promoting better understanding of and access to improved school facilities, (v) improving understanding of maternal and child health care and nutrition issues, (vi) developing a civic education framework and a peacebuilding and conflict prevention programme, and (vii)

protecting women and girls against gender-based violence and providing medical and psychosocial assistance to victims of gender-based violence.

NB: This document includes ONLY Annexes 1 & 3 with suggested revisions from February 2012 in red.

Annex I: Logical Framework

Affilex 1: Logical Framework	Objectively verifiable	Sources and		
Project strategy	indicators/ Performance	means of	Risk factors	Risk mitigation measures
,	indicators	verification		g
Human Security Goal 1: Ensure personal and community security through completion of the ex- combatants' reintegration process through sustainable livelihoods in five communities.	 Number of communities which benefit from human security within three years of implementation Percentage of people who benefited from the proposed project within three years of implementation 	- Project annual and interim reports	 Large-scale relapse of the country into violence which hampers the goal implementation Poor monitoring/evaluation may result in scant data to assess the progress made by the project 	 Inclusive governance to mitigate discontent Design and implement robust monitoring and evaluation scheme
Objective 1.1 :Ex-combatants, youths at risk, women affected by conflict and other vulnerable groups embark on income generating activities (2,500 male and 1,500 female, total of 4,000 beneficiaries)	 Number of profiling and surveys targeting 4,000 beneficiaries conducted and completed within 12 initial months of project implementation Number of beneficiaries per annum who have received necessary equipment and training to start up and sustain income generating activities 	 Submission of project implementation report Meeting with the beneficiaries 	 Large-scale relapse of the country into violence which hampers the objective implementation Volatility of ex-combatants who refrain from using the project reintegration approach Scant community ownership of the project activities and achievements Absence of civil servants who serve as national experts to the project Increased political involvement in the reintegration process as conducted by the project team Lack of capacity of implementing partners 	 Conduct awareness raising campaigns to better inform the participants on the project approach Strengthen capacities of existing local management and development committees to ensure their ownership on project activities and to build sustainability mechanisms Enhance participation of the Regional Council of the Pool region in the project implementation Work closely with civil servants to further involve them in the project activities Establish channels of discussions with politicians at high levels to secure a smooth implementation of the project activities
Output 1.1.1: Beneficiaries of the	- Number of beneficiaries	- Project	- Beneficiaries show reluctance	- Conduct great awareness-

programme and their profiles identified, and needs and opportunities of the communities assessed.	profiled within 12 months - Number of communities which have benefited from assessment of reintegration within 12 months	registration data-base - Mission reports on assessment conducted	towards registration given social stigmatization	raising campaign to secure community adherence to the initiative
Activities 1.1.1.1- 1.1.1.2.	 Number of surveys effectively conducted within 12 months Number of maps created of reintegration opportunities and services for the five communities within 12 months 	Mission reportsProject database	 Cultural tenets may jeopardize beneficiaries mobilisation Unavailability of data for assessment 	 Involve community leaders in the mobilisation effort Work closely with local authorities and community leaders to grasp background and setting of the reintegration area
Outputi.i.2: Total 4,000 excombatants, youths at risk, women affected by conflict and other vulnerable groups in the community (2,500 male and 1,500 women) receive counselling and tools/equipment for income generating activities.	- Number of beneficiaries reintegrated each year as compared to the total of 4,000 to be reintegration in three years	- Annual reports, interim reports	Limited ownership of the project achievements by beneficiaries	- Involve beneficiaries at all the project implementation levels
Activity 1.2.1.1– 1.1.2.4	 Number of implementing partners identified within 12 months Number of beneficiaries who received occupational counselling within 12 months Quantity of items provided per annum Number of monitoring missions conducted in project sites every 6 months 	 Database on implementing partners Database on beneficiaries Items provision forms and various project reports Mission report, project reports 	 Most of implementing partners are not legally recognised Illiteracy level of some beneficiaries may preclude counselling effort Delayed delivery of items by vendors may affect the implementation of this activity Road and security accessibility constraints 	 Build capacities and assist implementing partners to seek legal registration Using local languages and symbols to better convey the project messages To work with vendors renowned for their promptness To work closely with the UNDSS and organise interagency joint missions to enhance monitoring effort

Objective 1.2: 4,000 excombatants, youths at risk, women affected by conflict and other vulnerable groups (2,500 male and 1,500 female) with livelihoods in natural resource sectors, including agro-forestry, livestock and fisheries, develop their capacity to improve their livelihoods and increase productivity to gain more income.	 Number and percentage of projects supervised by UNVs and implementing partners Number of beneficiaries per annum who have received training to increase productivity in their particular natural resource sector including agro-forestry, livestock and fisheries 	- Submission of training report - Submission of project implementation report	 Limited involvement of government agricultural experts thus jeopardizing the ownership and the sustainability of the achievements Inadequate transportation means in the poorest North West area of the Pool region may delay the project implementation Illiteracy level of some beneficiaries may hamper understanding of farming standards taught by the Government and FAO experts 	 The UN agencies, FAO in particular, will engage in consultation with the Government at a high level to secure the participation of the Government experts in the project activities The project team will liaise with Rural Development Project for Likouala, Pool, Sangha(PRODER III) implemented by the Government and IFAD, which works on the improvement of agricultural access roads to the North West area of the Pool region Assign staff who is familiar with the local culture and language for missions to the field
Output 1.2.1: 4,000 beneficiaries (2,500 male and 1,500 female) trained to improve productivity of their livelihoods in agroforestry, livestock and fisheries.	- Number of beneficiaries per annum who received capacities development advice on agro-forestry, livestock and fisheries	- Reports of capacities development workshops	Illiteracy and inadequate educational level of some beneficiaries may preclude counselling effort	 Use local languages and symbols to better convey the project messages Deploy staff familiar with the customs and traditions of reintegration area
Activity 1.2.1.1- 1.2.1.3	- Number of analyses conducted on gaps in existing production techniques in the targeted area and recommendation	Analysis reportsTraining programme documents	 Scant data are available to improve analysis Implementing partners may prove unfamiliar with UN terminology and approach 	 Work closely with local authorities, community leaders to identify indications up to improve analysis Briefing implementing

	made - Number of programmes/modules designed in 12 months covering agro-forestry, livestock and fisheries - Number of beneficiaries trained per annum on productivity in agro- forestry, livestock or fisheries as compared to the timeframe of the project	designed - Training report, annual, interim and mission report	- Illiteracy and inadequate educational level of some beneficiaries may preclude them from understanding the programmes	partners on UN terminology and approaches prior to the design of documents - Use local languages and symbols to ensure make beneficiaries better understand the programmes - Make training more practical with the use of training symbols
Human Security Goal 2: Improve delivery of and access to basic social services, such as water and sanitation, health and education in five communities.	 Percentage of school attendance Reduction of water born-diseases Reduction of sexually transmitted diseases 	- Project annual and interim reports	- Epidemiologic risk in the region may jeopardize the achievement of the goal	- Liaise with the government official to identify and prevent risks
Objective 2.1:70,000 community members (33,000 male and 37,000 female) receive improved sanitation and access to safe drinking water in two most vulnerable communities (2,400 direct beneficiaries and 67,000 indirect beneficiaries).	- Number of sanitation per annum (latrines, wells, waste disposal) micro- projects implemented, water purification equipment installed, streams and water canals cleaned and water-related environmental health awareness raising sessions conducted	 Submission of mission report and project implementation report Submission of minutes of awareness raising sessions 	 Procurement of special water purification equipment may delay the implementation of the project activities The country proves to have a limited number of hydraulic engineers Inflow of population and arrival of new inhabitants who are not sensitized 	 Use faster channels of procurement should be used to mitigate the risk associated with the procurement of water purification equipment Liaise with local authorities to monitor the population inflow to intervene accordingly
Output 2.1.1: 70,000 community members (33,000 male and 37,000 female) in two communities (Mindouli and Kindamba, which are the most	- Number of beneficiaries per annum who have access to sanitation and safe drinking water	- Interim and annual reports	 Natural constraints as to improper site may preclude the implementation Heavy workload of contractors given that the 	 Conduct in-depth and proper study of site prior to implementation Through discussions make contractor prioritize the

vulnerable from a sanitation perspective) receive tools and equipments to improve water quality and participate in awareness raising activities and/or trainings on how to monitor and improve water quality in their households.			country lack expertise on watsan which may result in implementation delays	project
Activity 2.1.1.1– 2.1.1.5	 Number of local development committees established during the initial year of implementation Number of local development committees that receive complete kit of sanitation supplies each year Number of sanitation facilities built each year Number of awareness raising sessions conducted each year Number of micro-projects implemented each year to improve access safe drinking and water and hygiene system Number of systems established to monitor drinking water quality Number of individual households covered per annum on water storage technology Percentage of households 	- Interim reports and annual reports	 Unstable members of local development committee Wrong use of sanitation supplies and facilities Weak ownership of community members 	 Selecting members actually belonging to communities Intensifying awareness-raising campaigns

Objective 2.2: 4,000 excombatants, youths at risk, women affected by conflict and other vulnerable groups (2,500 male and 1,500 female) gain access to counselling screening services, opportunistic infections (OI) treatment and antiretroviral (ARV) therapy for HIV/AIDS in five communities.	covered per annum on water storage technology in each community - Number of service providers on counselling screening and ARVs prescription trained per annum.	- Mission reports and project implementatio n reports	 Absence of government service providers may jeopardize project implementation Increased stigmatization against HIV-positive beneficiaries may result in low attendance rate in screenings and counselling sessions. 	 Hold discussions with authorities of Ministry of Health to ensure continued participation of service providers to the project activities Conduct sensitization campaigns in a synchronized manner to fight stigmatization against HIV-
Output 2.2.1: Service providers of counselling screening and ARVs prescription in five communities participate in training and/or re-training and local health centre staff receive advice from consultants to provide better support on HIV/AIDS to those who are vulnerable.	 Number of improved counselling screening services, OI treatment and ARV therapy for HIV/AIDS per annum Number of beneficiaries covered by improved counselling screening services, OI treatment and ARV therapy for HIV/AIDS per annum 	- Interim reports and annual reports	- Beneficiaries feel reluctant to come forward given community stigmatization of HIV/AIDS and OI problems	positive beneficiaries. - Fight stigmatisation in communities
Activity 2.2.1.1- 2.2.1.3	 Number of training/retraining provided to service providers of counselling screening The consultant is effectively hired and contract signed Number of staff who benefit from capacities building 	- Interim reports and annual reports	 Counselling service providers may be unstable in some areas of the project implementation ARV service providers may be unstable in some areas of the project implementation Local health centres staff fail to claim ownership of the consultant's work 	 Liaise with the government official to secure greater participation of counselling service providers Liaise with the government official to secure greater participation of ARV service providers Work closely with and sensitize local health centres staff to secure greater

				ownership
Objective 2.3: 4,500 students (2,500 boys and 2,000 girls) have better understanding of and access to improved school facilities (water, sanitation and food) in five communities.	 Number of students per annum who received awareness raising activities on diseases caused by unsafe drinking water Number of students per annum who benefited from improved educational facilities 	 Mission report and project implementatio n report Interim reports 	 Poor sense of ownership of members of local management and development committees Limited community participation in the achievement of results of the project 	 Raise awareness of members of local management and development committees Raise awareness of members the community where the target schools are located
Output 2.3.1: 4,500 students (2,500 boys and 2,000 girls) participate in focus group meetings to discuss diseases caused by poor quality of drinking water and importance of school sanitation and associated health risks.	- Number of students sensitized	- Interim reports and annual reports	- Weak community involvement or mobilisation	- Liaise with community leaders to mobilise people
Activity 2.3.1.1	 Number of focus group meetings organised Number of students attended the focus group meetings 	- Interim reports and annual reports	- Weak community involvement or mobilisation	- Liaise with community leaders to mobilise people
Output 2.3.2: Sanitation equipment and facilities are provided to 25 schools and teachers, students, community members in five communities participate in awareness raising trainings and activities on healthy school environment.	 Number of schools received complete hygiene kits Number of teachers, students and community members attended awareness raising trainings and activities Number of local development committees created Number of local development committee 	- Interim reports and annual reports	- Weak community involvement or mobilisation	- Liaise with school teachers and community leaders to mobilise people

	members trained		
Activity 2.3.2.1	 Number of focus group meetings organized Number of students attended focus group meetings 	- Interim reports - Lack of students' interests and annual reports	- Involve school teachers and peer leaders to mobilise people
Objective 2.4: 4,000 excombatants, youths at risk, women affected by conflict and other vulnerable groups (2,500 male and 1,500 female) have better understanding of maternal and child health care and nutrition issues in five communities.	- Number of people who receive awareness-raising session per annum on maternal and child health care and nutritional issues	 Mission reports, project implementatio n reports and interim reports Minutes of awareness raising sessions Cultural tenets may affect the mobilization activities thus jeopardizing community awareness on the extent of the problems to be addressed The presence of unskilled medical staff in remote areas may reduce the sense of ownership of the Government of the project activities 	 Taking into account the cultural tenets and being familiar with them as the project team embark on the mobilization and awareness-raising activities Liaising with the Government at high level to address issues associated with the quality of staff provided in health posts
Output 2.4.1: 4,000 excombatants, youths at risk, women affected by conflict and other vulnerable groups (2,500 male and 1,500 female) participate in awareness raising activities on maternal and child health care and nutrition issues in five communities.	- Number of beneficiaries sensitized	- Interim reports - Weak community involvement reports	- Increased mobilisation of community leaders to maximise community mobilisation
Activity 2.4.1.1- 2.4.1.2	 Number of sessions held to raise awareness on childhood illness Number of sessions held to raise awareness on nutrition education to beneficiaries Number and percentage of children who receive deworming and vitamin supplementation 	- Interim reports and annual reports - Weak community involvement	- Increased mobilisation of community leaders to maximise community mobilisation

Human Security Goal 3: Support community empowerment processes and promote a culture of peaceful coexistence between and among the five participating communities.	 Community capabilities to assess and address development issues developed Number of incidents occurrence between communities 	- Interim reports and annual reports	- Large-scale relapse of the country into violence which hampers the goal implementation	- Inclusive governance to mitigate discontent
Objective 3.1: A civic education framework and a peace-building and conflict prevention programme are developed to ensure mutual understanding and to overcome the socialization of violence in five communities to benefit 2,000 community members.	 Number of community leaders who are trained per annum on leadership and reconciliation Number of sports and cultural sessions held per annum Number of sessions on public affairs and communications which are held to raise the profile of UN agencies and the concept of human security. 	- Training report - Project implementatio n and interim reports	 The relapse of the Pool region into conflict which hampers the project activities Reluctance of ex-combatants to adhere to the move to address the socialization of violence in the community 	 Monitoring the political situation in the country to proactively identify a proper exit strategy in the event of problems Conducting special sensitization sessions among ex-combatants to address their concerns and to guide them along the project implementation
Output 3.1.1: Community leaders participate in trainings on leadership and reconciliation, and sports and cultural events, dramas and camps focusing on peacebuilding activities are organized and launched.	- Number and percentage of people within community reached by sports and cultural events	- Interim reports and annual reports	- Weak community involvement	- Increase mobilisation of community leaders to maximise community mobilisation
Activity 3.1.1.1- 3.1.1.4	 Number of community leaders trained on leadership and reconciliation Number of sport events organized and which take place Number of people who 	- Interim reports and annual reports, events reports	- Weak community involvement	- Increase mobilisation of community leaders to maximise community mobilisation

Output 3.1.2: 35,000 community members (15,000 male and 20,000 female) participate in awareness raising sessions and training on their rights.	participate in the sport events - Number of dramas created - Number of people who saw the drama - Number of awareness raising sessions and trainings held	- Interim reports and annual reports, events reports	- Weak community involvement	- Increase mobilisation of community leaders to maximise community mobilisation
Activity 3.1.2.1	- Number of community members participated in sessions and trainings	- Interim reports and annual reports, events reports	- Weak community involvement	- Increase mobilisation of community leaders and maximise community mobilisation
Objective 3.2: Gender-based violence in 1,000 households is reduced and medical and psychosocial assistance are provided to 2,000 victims of gender-based violence in five communities.	 Number of awareness raising sessions held per annum on gender-based violence Frequency of medical and psychosocial assistance provided to victims of gender-based violence 	- Minutes of awareness raising sessions - Project reports and the evaluation report	 Cultural habits may reduce the participation of women in project activities and thus minimizing the project impact Civil servants who are supposed to support and monitor the project activities are not very familiar with gender issues 	 Intensify awareness raising campaigns towards communities all along the project implementation to promote better understanding of the project gender dimension Hold training workshops on gender to develop capacities of government officials involved in the project implementation
Output 3.2.1: National legal framework is strengthened to prevent gender-based violence and disseminated.	- Number of draft national strategies (and other policy documents) produced	- National reports on legal documents, project reports, interim reports	- The government asserts its sovereignty on some aspects of the project implementation such as those related to the amendment of national legislation	- Discuss and advocate on sovereignty issues at higher level of Congolese government to ensure smooth achievement of sensitive aspects of the project
Activity 3.2.1.1	- Number of sensitization sessions organisation per annum	- National reports on legal	- Political reluctance on some legal provisions	- Discussion at higher level for smooth implementation of the activity

	 Number of legal documents updated per annum Number of institutions before which advocacy is conducted 	documents, project reports, interim reports		
Output 3.2.2: 50 community leaders, 3,000 ex-combatants, police officers and members of the Republic of Congo Armed Forces participate in awareness raising sessions and training to improve awareness on women's rights and gender-based violence.	 Number of people sensitized per annum Number of community leaders sensitized per annum 	- Project reports, interim reports	- Weak community involvement	- Increased mobilisation of community members to maximise mobilisation
Activity 3.2.2.1- 3.2.2.2	 Number of awareness-raising sessions held per annum Number of people medically supported per annum 	- Project reports, interim reports, police reports on violence	 Weak community involvement Social stigmatisation of victims of gender-based violence prevents the victims from coming forward for support 	 Increased mobilisation of community members to maximise mobilisation Fight social stigmatisation
Output 3.2.3: 2,000 women and girls affected by gender-based violence receive medical care and psychosocial support.	- Number of women and girls who received medical care and psychosocial support	- Project reports, interim reports	- Weak community ownership	- Scale up mobilisation of community members to maximise participation and ownership
Activity 3.2.3.2	 A consultant is hired and on board Number of health centers which receive capacities building effort to provide counselling and psychological support to victims of gender-based violence 	- Project reports, interim reports	- Weak community ownership	- Scale up mobilisation of community members to maximise participation and ownership

Annex III: Annual work plan

Project title: Joint United Nations Programme for Peace Consolidation, Conflict Prevention and Human Security in the Republic of

Congo

UNTFHS project number: UDP - AF - 11-086

Year: 2012

	Planned activities		Timeframe			Responsib	Planned
Expected outputs			Q 2	Q ₃	Q 4	le party	budget
Output 1.1.1: Beneficiaries of the programme and their profiles identified, and needs and opportunities of the communities	Activity 1.1.1: Conduct profiling and surveys targeting excombatants, youths at risk, women affected by conflict and other vulnerable groups in the community to collect data including their education and qualifications, specific needs and expectations	х	x			UNDP	85,000
assessed	Activity 1.1.1.2: Conduct reintegration opportunities and services mapping in five targeted communities	X	X			UNDP	85,000
Output a sa Total a soo ov	Activity 1.2.1.1: Identify and confirm implementing partners for training and job counselling	X	X			UNDP	6,250
Output 1.1.2: Total 4,000 ex- combatants, youths at risk, women affected by conflict and other vulnerable groups in the community	Activity 1.1.2.2: Provide occupational counselling to beneficiaries to match economic opportunities and skill-sets of each beneficiary and follow up on their activities			x	X	UNDP	280,000
(2,500 male and 1,500 female) receive counselling and tools/equipment for income generating activities	Activity 1.1.2.3: Provide tools, seeds, manure, fertilizer and/or other equipments for their selected livelihoods			X	X	UNDP	200,000
income generating activities	Activity 1.1.2.4: UNVs and implementing partners supervise and monitor 1.1.2.2 and 1.1.2.3	X	X	X	X	UNDP	22,700
Output 1.2.1: 4,000 beneficiaries (2,500 male and 1,500 female) trained to improve productivity of their	Activity 1.2.1.1: Conduct analysis of challenges and lessons learned on existing production techniques in the three livelihood domains in the targeted communities and provide recommendations for improvement	x				FAO	18,000

livelihoods in agro-forestry, livestock and fisheries

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	Activity 1.2.1.2: Define themes and design training programmes/modules for agro-forestry, livestock and fisheries in cooperation with implementing partners and local context	x				FAO	7,500
	Activity 1.2.1.3: Provide training to 4,000 beneficiaries to improve productivity in either agro-forestry, livestock or fisheries		x	x	х	FAO	300,000
Output 2.1.1: 70,000 community	Activity 2.1.1.1: Establish five local development committees in each community to monitor and follow up on project activities	X	X			WHO	10,000
members (33,000 male and 37,000 female) in two communities	Activity 2.1.1.2: Distribute sanitation supplies and build sanitation facilities and raise awareness on sanitation issues		X	x		WHO	8,000
(Mindouli and Kindamba, which are the most vulnerable from a sanitation perspective) receive tools	Activity 2.1.1.3: Provide support to the implementation of micro-projects to improve access to safe drinking water and hygiene system		x	x	х	WHO	42,900
and equipments to improve water quality and participate in awareness raising activities and/or trainings on how to monitor and improve water quality in their households.	Activity 2.1.1.4: Provide support to the establishment of a system to monitor drinking water quality		x	x	х	WHO	13,000
	Activity 2.1.1.5: Provide support to the updating of the water storage technology in individual households		x	х	х	WHO	15,000
Output 2.2.1: Service providers of counselling screening and ARVs	Activity 2.1.1.1: Provide training and/or retraining to service providers of counselling screening (and FP counseling)		x			WHO	4,500
prescription in five communities participate in training and/or retraining and local health centre staff	Activity 2.1.1.2: Provide training and/or retraining to service providers of ARVs prescription (and FP counseling)			x		WHO	3,000
receive advice from consultants to provide better support on HIV/AIDS to those who are vulnerable	Activity 2.2.1.3: Hire consultant to advise and build capacity of the staff of local health center	x	x	x		WHO	10,000
Output 2.3.1: 4,500 students (2,500 boys and 2,000 girls) participate in focus groups to discuss diseases caused by poor quality of drinking water and importance of school sanitation and associated health	Activity 2.3.1.1: Organize focus group meetings and conduct activities targeting students to raise awareness on diseases caused by poor quality of drinking water		x	x	х	WHO	5,000

risks							
	Activity 2.3.2.1: Train school teachers and student leaders on importance of improving and maintaining school facilities		х	X	х	UNICEF	10,000
Output 2.3.2: Sanitation equipment and facilities are provided to 25	Activity 2.1.4.2: Provide facilities to improve facilities of schools that were not covered by the existing UN programmes		x	х	x	UNICEF	25,000
schools and teachers, students, community members in five communities participate in awareness raising trainings and activities on healthy school environment	Activity 2.3.2.3: Establish Community Management and Development Committees (CGDC) to secure local ownership in improving school environment in at least 25 schools in five targeted communities	х	х	х		UNICEF	10,000
	Activity 2.3.2.4: Train members of CGDC on importance on improving and monitoring school environment		х	x	х	UNICEF	9,000
	Activity 2.3.2.5: Conduct activities to raise public awareness on school environment and key educational issues	х		х		UNICEF	5,000
Output 2.4.1: 4,000 ex-combatants, youths at risk, women affected by conflict and other vulnerable groups	Activity 2.4.1.1: Conduct activities to raise awareness on childhood illnesses to promote the use of appropriate health care services	x	x			UNICEF	36,000
(2,500 male and 1,500 female) participate in awareness raising activities on maternal and child health care and nutrition issues in five communities	Activity 2.4.1.2: Provide nutrition education to beneficiaries and establish local alert network for mutual assistance	x	х	х		UNICEF	40,000
Output 3.1.1: Community leaders	Activity 3.1.1.1: Train community leaders on leadership and reconciliation	х				UNDP	1,500
participate in trainings on leadership and reconciliation, and sports and cultural events, dramas and camps	Activity 3.1.1.2: Organize and implement three sports event by creating local leagues and three cultural events in five targeted communities	х		x		UNDP	5,000
focusing on peacebuilding activities are organize and launched	Activity 3.1.1.3: Create one drama and organize events to enact drama		х	X		UNDP	5,000

							1, 689,958
	PSC (7% project cost)	X	X	X	X	UNDP	110,558
1 Toject coordination	Communication and public affairs	X	X	X		UNDP	15,000
Project coordination	Stationary, equipment and miscellaneous items	X		X		UNDP	7,900
	Project staff	X	X	X	X	UNDP	165,000
psychosocial support	Activity 3.2.3.2: Hire consultants to build capacity of local health center to provide counseling and psychological support to victims of gender-based violence	x	x	x		UNFPA	22,500
Output 3.2.3: 2,000 women and girls affected by gender-based violence receive medical care and	Activity 3.2.3.1: Provide medical support to 2,000 women and girls and establish a monitoring network for gender-based violence		х	х	x	UNFPA	17,650
Congo Armed forces participate in awareness raising sessions and training to improve awareness on women's rights and gender-based violence	Activity 3.2.2.2: Organize and conduct awareness raising sessions and activities to address gender dimensions of violence, targeting male ex-combatants, police officers and members of the RoC Armed forces as well as female community members and children		х	х	x	UNFPA	15,000
Output 3.2.2: 50 community leaders, 3,000 ex-combatants, police officers and members of the Republic of	Activity 3.2.2.1: Organize and conduct awareness raising sessions and training of trainers on women's rights and gender-based violence targeting community leaders		X		х	UNFPA	35,000
Output 3.2.1: National legal framework is strengthened to prevent gender -based violence and disseminated	Activity 3.2.1.1: Update national legal framework for prevention of gender-based violence and organize sensitization sessions in each community	х		х		UNFPA	15,000
Output 3.1.2: 35,000 community members (15,000 male and 20,000 female) participate in awareness raising sessions and training on their rights	Activity 3.1.2.1: Organize and implement three awareness raising sessions on citizens rights and duties (including human rights and domestic violence) in each community	X	x			UNDP	15,000
	Activity 3.1.1.4: Organize three summer camps to exchange youths from different regions			x		UNDP	9,000

Annex 5: Revised Annual Work Plan

*See attached Excel spreadsheet

<u>Annex 6:</u> Suggested Additional Questions for Profiling

Below are a sample of suggested questions that could be included in the profiling activities under Objective 1.1 to address some very basic gendered needs of potential participants. All of these questions are drawn directly from the 2005 Demographic and Health Survey (DHS) carried out in Republic of Congo, the final report for which can be found here:

http://www.measuredhs.com/publications/publication-FR182-DHS-Final-Reports.cfm

While these questions are designed to be asked to women in the DHS they could also be posed to the men who will be profiled for the Joint Program with minimal modification.

-To measure current use and gain some sense of unmet need for family planning. Note that the calculation for unmet need is more complex than this survey would allow, but this could give some baseline indication of need and non-use, both of which should be affected by the <u>four points of contact mentioned earlier in the report</u>:

310. En ce moment, faites-vous quelque chose ou utilisez-vous une méthode pour éviter de tomber enceinte ?

OUI	 1
NON	 2

602. (NORMALEMENT IL FAUT VÉRIFIER QU'ELL N'EST PAS ENCEINTE OU PAS SÛRE) (SI ELLE N'EST PAS ENCEINTE/PAS SURE ON POURRA POSER CETTE QUESTION) Maintenant j'ai quelques questions au sujet de l'avenir. Voudriez-vous avoir un (autre) enfant, ou préféreriez-vous ne pas avoir d'(autres) enfants du tout ?

(SI ELLE EST ENCEINTE ON POURRA POSER CETTE QUESTION)

Maintenant j'ai quelques questions au sujet de l'avenir. Après l'enfant que vous attendez, voudriez-vous avoir un autre enfant, ou préféreriez-vous ne pas avoir d'autres enfants du tout?

AVOIR (UN/UN AUTRE) ENFANT	1
PAS D'AUTRE DU TOUT/AUCUN	2
DIT QU'ELLE NE PEUT PAS TOMBER ENCEINTE	3
INDÉCISE/NE SAIT PAS : ET ENCEINTE	4
INDÉCISE/NE SAIT PAS : ET PAS ENCE	EINTE/
PAS SÛRE	5

607. (VÉRIFIER 602) SI ELLE VEUT UN/UN AUTRE ENFANT:

Vous avez dit que, dans l'immédiat, vous ne vouliez pas avoir (un/un autre) enfant, mais vous n'utilisez pas de méthode pour éviter une grossesse. Pouvez-vous me dire pourquoi ?

ENREGISTRER TOUTES LES RAISONS MENTIONNÉES.

Autre raison?

SI ELLE NE VEUT PAS D'(AUTRE) ENFANT:

Vous avez dit que vous ne vouliez pas d'(autre) enfant, n éviter une grossesse. Pouvez-vous me dire pourquoi ?	nais vous n'utilisez pas de méthode pour
ENREGISTRER TOUTES LES RAISONS MENTIONNÉES.	Autre raison ?
ENREGISTRER TOUTES LES RAISONS MENTIONNÉES.	
608. Dans les semaines qui viennent, si vous découvriez problème important, un petit problème ou cela ne vous	
	PROBLÈME IMPORTANT1
	PETIT PROBLÈME2
	AUCUN PROBLÈME3
DIT PEUT PAS TOMBER ENCEIN	ITE/N'A PAS DE RAPPORTS SEXUELS4
610. (VÉRIFIER: SI ELLE UTILISE UNE MÉTHODE, NE I Pensez-vous que, dans un avenir proche ou lointain, vou une méthode pour retarder ou éviter une grossesse ?	· · · · · · · · · · · · · · · · · · ·
	OUI
	NON2
	NE SAIT PAS8
 To measure knowledge or communication about which could be improved by the MCHN awarene 	, , , , , , , , , , , , , , , , , , , ,
301. De quels moyens ou méthodes avez-vous entendu por CITÉES SPONTANÉMENT, DEMANDER : Avez-vous dé (suivi par liste de 14 METHODES)	
625. Combien de fois, au cours des douze derniers mois, familiale avec votre mari/partenaire ?	avez-vous parlé de la planification
'1	JAMAIS1
	UNE OU DEUX FOIS2
	PLUS SOUVENT3

<u>Annex 7:</u> Presentation to Program Management Team

*See attached PDF